

11046 U.S. PTO
09/09/931708
08/16/01

EXPRESS MAIL CERTIFICATE

8/16/01 EL 903056900-US

Date 8/16/01 Label No. EL 903056900 -US
I hereby certify that, on the date indicated above, this paper or
fee was deposited with the U.S. Postal Service & that it was
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ents, Washington, DC 20231 by "Express Mail Post Office to
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D. Davis
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08/16/01

Customer No.:



07278

PATENT TRADEMARK OFFICE

Docket No: 3191/0J589

DARBY & DARBY P.C.

805 Third Avenue
New York, New York 10022
212-527-7700

Box PATENT APPLICATION
Assistant Commissioner for Patents
Washington, DC 20231

Sir:

Enclosed please find an application for United States patent as identified below:

Inventor/s (name ALL inventors): Wolfgang Reik; Thomas Rammhofer;
Matthias Zink

Title: POWER TRAIN FOR USE IN MOTOR VEHICLES AND THE LIKE

including the items indicated:

1. Specification and 50 claims: 2 indep.; 48 dep.; _ multiple dep.;
including 67 page(s) of written description; 14 page(s) of claims;
1 page(s) of abstract.
2. Drawings, 3 sheets (Figs. 1-7)
3. Executed Declaration/Power of Attorney
4. Assignment for recording to: LuK Lamellen und Kupplungsbau
Beteiligungs KG

[X] Pursuant to 37 C.F.R. §1.215(b), please print the following assignment information on the face of the published application:

Assignee: LuK Lamellen und Kupplungsbau Beteiligungs KG

5. [X] Priority is claimed under 35 U.S.C. §119(b) of:

Country: Federal Republic Germany
Number: 100 40 168.6
Date: 17 August 2000

A certified copy of the prior document [X] is enclosed.

6. [X] Payment in amount of \$1,290.00 (\$710.00 filing; \$40.00 recording; 30 additional claims \$540.00;
in the form of
[X] check
[] deposit account no. 04-0100
[] credit card (see attached form)
(See attached Fee Computation Sheet)
7. [X] Information Disclosure Statement

Date: August 14, 2001

Respectfully submitted,



Edward J. Ellis
Registration No. 40,389
Attorney for Applicant(s)

Serial No. To be assigned

Docket No. 3191/0J589

PATENT FEE COMPUTATION SHEET

No. of Claims Presented	Extra Claims Previously Paid For	Number of Extra Claims	Rate
Basic Fee			\$710.00
Total Claims 50 - 20	- 0 = 30	x \$18.00	\$540.00
Independent Claims 2 - 3	- 0 = 0	x \$80.00	\$0.00
Multiple Dependent Claims	- if so, add	\$270.00	\$0.00
SUBTOTAL			\$1250.00
Fee for recordation of assignment (\$40.00)			\$40.00
TOTAL			\$1290.00

Serial No. To be assigned

Docket No. 3191/0J589